



Missouri Department of Health and Senior Services

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Richard W. Moore
Acting Director



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Governor

February 3, 2022

Health Order to Administer ACON Flowflex COVID-19 Antigen Home Test for Symptomatic or Asymptomatic State Employees and Contractors Entering Workspaces Occupied by State Employees

Purpose:

To enable state agencies to implement testing for symptomatic or asymptomatic state employees and contractors entering workspaces occupied by state employees in an effort to increase testing options available to the state workforce through use of the ACON Flowflex COVID-19 Antigen Home Test.

The ACON Flowflex COVID-19 Antigen Home Test may be used to test symptomatic individuals or asymptomatic Individuals (state employees or contractors) considered a close contact of an individual with SARS-CoV-2. The ACON Flowflex COVID-19 Antigen Home Test may be used for screening of staff or contractors and, if used in this manner, are recommended to be used in a serial fashion. Symptoms of SARS-CoV-2 are a new cough, difficulty breathing, loss of taste or smell, fever ($\geq 100.4^{\circ}\text{F}$), congestion/runny nose, nausea/vomiting/diarrhea, sore throat, headache, and myalgia.

Policy:

This health order allows any state employee designated as a test administrator by their respective state agency and who has successfully completed the required ACON on-line training for ACON Flowflex COVID-19 Antigen Home Test administration to conduct sample collection or observe sample collection performed by the state employee or contractor themselves to assure quality assurance.

All test administrators and test reporters from respective state agencies understand the test result information is confidential and cannot be released, other than to the Missouri Department of Health and Senior Services for reporting purposes as required, and positive test results to the program supervisor and the respective state agency's human resources contact.

Procedure:

1. Evaluate individuals with the above criteria for symptoms of COVID-19 in the past seven days
2. Provide Flowflex Fact Sheet For Patients
3. Offer opportunity for questions
4. Ensure permission has been obtained
5. Administer the test pursuant to the Product Insert and Procedure Card
6. Document
 - a. Date, time, location of test
 - b. Name, title, and professional license number of person administering the test
 - c. Name of test and manufacturer lot and number

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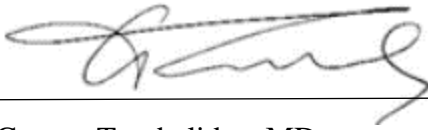
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- d. Results of the test
 - e. Presenting symptoms
 - f. Verification of signed consent form
7. Submit the required data and all test results via secure file transfer protocol in accordance with the procedure specified by the Missouri Department of Health and Senior Services (DHSS) within twenty-four hours of each test's administration.
 8. Immediately notify the individual tested of his or her result and implement appropriate control measures accordingly.

This order and procedure shall remain in effect until rescinded or until December 31, 2022.

A handwritten signature in dark ink, appearing to read 'George Turabelidze', is written over a horizontal line.

George Turabelidze, MD